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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Doctor Number		
APPLICATION AS FILED — PART I (Column 1) (Column 2)						~	SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY	
FOR		NUME	NUMBER FILED NU		BER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	SIC FEE CFR 1.16(a). (b), or ((c))				1]		
SE	ARCH FEE CFR 1.16(k), (i), or (i]					
EX	AMINATION FEE					1			1		
_	CFR 1.16(0), (p), or (TAL CLAIMS	(Q))				1					· · · · · · · · · · · · · · · · · · ·
_	CFR 1:16(i))——— EPENDENT CLA	IMS	-minus 2	0-=		1	X =		OR-	.x=	
(37 CFR 1.16(h))			minus :	and drawings		-	X =		,	x =	<u> </u>
FEE	PLICATION SIZE E CEP 1.16(5))	sheets of is \$250 (additional	paper, to \$125 for 150 sheet	ne application somall entity) for ets or fraction the ()(G) and 37 CF	ize fee due each ereof. See			: :-			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							٠.				
If the difference in column 1 is less than zero, enter '0' in column 2.							JOTAL			TOTAL	
	APPI	ICATION AS	AMEND	ED – PART II			•.*				
(Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENT A	62705	CLAIMS REMAINING AFTER AMENDMENT	-	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONA FEE (\$)
	Total (37 CFR 1.16(1))	13	Minus	20	=		x 25=	7	OR-	×50 =	/,
	Independent (37 CLR 1,15(h))	2	Mining	3	J	1	× 100 =	. /	OR	× 2,00 =	
	Application Size Fee (37 CFR 1,15(s))].					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3, CFR 1.18(j))						180	[]	OR	360	1
-						_	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
			•				7,002.722 1			1.00 21 22	
MENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT. EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (27 CFR 1,150))	•	Minus	**	= '		x =		- OR-	X· - =	
	Independent (37 CFR 1.16(h))	•	Minus		† -		x : =.		OR .	x =	
	Application Size Fee (37 CFR 1.16(s)).						^	<u> · · · · · · · · · · · · · · · · · </u>	UR .	^	
AM.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16())							-	OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		olumn 1 is less tha					er*20*,		· · ·		

"" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 30, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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